



November 18, 2016

VIA ELECTRONIC SUBMISSION

The Honorable Sylvia Mathews Burwell
Secretary
Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Re: Illinois Behavioral Health Transformation

Dear Secretary Burwell,

Georgetown University Center for Children and Families is a nonpartisan research and policy center with a mission to improve access to affordable, comprehensive health coverage for children and their families. We write in response to your request for public comments on Illinois's proposed 1115 waiver, known as Behavioral Health Transformation.

We support Illinois's effort to better integrate and prioritize the mental health and substance abuse needs of its Medicaid population with primary care. In particular, we were pleased to see new approaches to housing and employment support for vulnerable beneficiaries. Notably, the proposal accomplishes this by relying on and preserving Medicaid's core financing structure that can provide the needed resources to integrate these additional supports.

While overall we support the intent of these reforms and the move toward improved value in care, we hope the waiver terms and conditions will encourage the state to consider the unique needs of children and families as every aspect of the waiver is implemented. Given the higher cost and utilization of adult populations, the emphasis of delivery system and payment changes often remains exclusively on adult-focused strategies even though the reforms will impact the full Medicaid population. In Illinois, nearly half of Medicaid beneficiaries are children.ⁱ If children and their families are not an explicit focus of such efforts, we risk overlooking models of care that can stem the tide of more complex diseases and poorer outcomes later in adulthood. Moreover, applying new models that were created primarily with adults in mind risks creating unintended complications in children's care, which for the majority of children requires a focus upon improving primary, preventive, and developmental health services.

To this end, we were pleased Illinois plans to include evidence-based early childhood interventions, Infant/Early Childhood Mental Health Consultation (I/EMCH) and evidence-based


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home visiting (EBHV). We also hope the state will seek additional opportunities to use Medicaid authority outside waiver authorities to help ensure more children and their caregivers receive services and supports like these that have strong track records of prevention and intervention for young children, helping them to grow and thrive well into adulthood.

Thank you for your consideration of these comments. Please feel free to contact Elisabeth Wright Burak (elisabeth.burak@georgetown.edu) with any questions.

Sincerely,



Joan C. Alker
Executive Director

ⁱ U.S. Department of Health and Human Services (November 2016). Medicaid & CHIP: August 2016 Monthly Applications, Eligibility Determinations and Enrollment Report. Available at <https://www.medicaid.gov/medicaid/program-information/downloads/august-2016-enrollment-report.pdf>